

Regional or Metro Planning Agency, Address and Contact

# INVOICE # 123456

To: MICHIGAN DEPARTMENT OF  
TRANSPORTATION  
[Program Manager]  
PO Box 30050  
Lansing, MI 48909

Invoice Date: \_\_\_\_\_  
Final \_\_\_\_Yes \_\_\_\_No  
(check one)

Contract/Authorization No.: [2018-00XX/ZX] Asset  
Management Program

[Billing Period: \_\_\_\_\_]

Labor	\$	0.00
Fringes		0.00
Office Supplies		0.00
Consultant		0.00
Postage		0.00
Indirect		0.00
Equipment		
- Hardware		0.00
- Software		0.00
Travel Expenses		
- Food		0.00
- Lodging		0.00
- Mileage		0.00
Meeting Expense		0.00
Registration/Dues/Subscriptions		0.00
Miscellaneous		0.00
Local Agency Reimbursement		0.00

Total Requested Amount:	\$	<u>0.00</u>
YTD Cost Total	\$	<u>          </u>
YTD Percent Complete	%	<u>          </u>

Agency Approval \_\_\_\_\_

MDOT Program Manager \_\_\_\_\_

MDOT Supervisor \_\_\_\_\_

CSD Payments \_\_\_\_\_

## Table of Expenses – Asset Management Program Expenses by Work Item Category

Work Item Category -Asset Management Task	Invoice Period - ____ FY2019
<b>I. Training Activities</b> <b>Total</b>	<b>\$0.00</b>
- Act 51 Agencies Total	\$0.00
Salary & Benefits	\$0.00
Travel	\$0.00
Other	\$0.00
- MPO or Region Total	\$0.00
Salary & Benefits	\$0.00
Travel	\$0.00
Other	\$0.00
<b>II. Equipment</b> <b>Total</b>	<b>\$0.00</b>
<b>III. Data Collection (Federal Aid System) Total</b>	<b>\$0.00</b>
- Invoices from Act 51 Agencies Total	\$0.00
- MPO or Region Total	\$0.00
Salary & Benefits	\$0.00
Travel	\$0.00
Other	\$0.00
<b>III. Data Collection (Non-Federal Aid) Total</b>	<b>\$0.00</b>
- Invoices from Act 51 Agencies Total	\$0.00
- MPO or Region Total	\$0.00
Salary & Benefits	\$0.00
Travel	\$0.00
Other	\$0.00
<b>IV. Data Submission &amp; Tech Support</b> <b>Total</b>	<b>\$0.00</b>
- MPO or Region Total	\$0.00
Salary & Benefits	\$0.00
Travel	\$0.00
<b>V. Unforeseen/Misc.</b> <b>Total</b>	<b>\$0.00</b>
<b>Invoice Total</b>	<b>\$0.00</b>

## Budget Report

Work Item Category	2018-2019 Budget	Year to Date Expenses
Training Activities: Wages & Travel		
Data Collection: Federal Aid (Wages, Travel)		
Local (Per Mile Rate or Wages, Travel)		
Equipment		
Data Submission & Tech Support		
Unforeseen		
Total		

## **Asset Management Program Activity Report by Work Item Category**

**I. Training Activities:** Please identify the training session(s) held and/or attended during the reporting period. Include travel/wages to and from sessions.

**II. Equipment & Vehicle Rental:** Please provide a list of equipment purchased and/or vehicle(s) rented and the reason for the purchase.

### **III. Data Collection**

**Data collected on Federal Aid Roads:** Please attach daily work logs, include any applicable travel/wages and include geographic area covered in the collection.

**Data collected on Non-Federal Aid Roads:** These include roads that are not federal-aid eligible. Please attach daily work logs, include total miles rated at applicable rate as well as geographic area covered in the collection.

**IV. Data Submission & Technical Assistance Activities:** Please include activities related to checking collected condition data, providing IRT assistance or other local government assistance.

**V. Unforeseen:** Please describe any Transportation Asset Management Council related activities your agency participated in.